Amendments to the claims:

Following is a complete listing of the claims pending in the application, as amended:

Claims 1-26 (canceled)

27. (Previously presented) A composition comprising a ψεRACK peptide having a sequence that is at least about 50% identical to SEQ ID NO:2, said peptide attached by an N-terminal cysteine residue to a Tat-derived peptide or to a polyarginine peptide.

28. (Canceled)

29. (Previously presented) The composition of claim 27, wherein said ψεRACK peptide has a sequence that is at least about 70% identical to SEQ ID NO:2.

30. (Canceled)

31. (Previously presented) The composition of claim 27, wherein said ψεRACK peptide has a sequence that is at least about 80% identical to SEQ ID NO:2.

32. (Canceled)

33. (Previously presented) The composition of claim 27, wherein said Tat-derived peptide has a sequence identified as SEQ ID NO:5.

34. (Previously presented) A method for reducing in vivo damage due to ischemia, hypoxia, or reperfusion injury, comprising administering the peptide according to claim 27.

35. (Previously presented) The method of claim 34, wherein said administering is by a route selected from the group consisting of intravenous, parenteral, subcutaneous, inhalation, intranasal, sublingual, mucosal, and transdermal.

36. (Previously presented) The method of claim 34, wherein said administering is by infusion through coronary arteries to the heart.

37. (Previously presented) The method of claim 34, wherein said administering comprises administering the peptide prior to ischemia, hypoxia, or reperfusion.

38. (Previously presented) The method of claim 34, wherein said administering comprises administering the peptide after ischemia, hypoxia, or reperfusion.

39. (Previously presented) The method of claim 34, wherein said administering comprises administering the peptide during ischemia, hypoxia, or reperfusion.

40. (Previously presented) A method for reducing damage to an organ due to ischemia, hypoxia, or reperfusion injury, comprising administering the peptide according to claim 27.

41. (Previously presented) The method of claim 40, wherein the method is for reducing damage to an organ selected from the group consisting of heart, lung, liver, brain, and kidney.

42. (Previously presented) The method of claim 40, wherein said administering is by a route selected from the group consisting of intravenous, parenteral, subcutaneous, inhalation, intranasal, sublingual, mucosal, and transdermal.

43. (Previously presented) The method of claim 40, wherein said administering is by infusion through coronary arteries to the heart.

44. (Previously presented) The method of claim 40, wherein said administering comprises administering the peptide prior to ischemia, hypoxia, or reperfusion.

45. (Previously presented) The method of claim 40, wherein said administering comprises administering the peptide after ischemia, hypoxia, or reperfusion.

46. (Previously presented) The method of claim 40, wherein said administering comprises administering the peptide during ischemia, hypoxia, or reperfusion.

47. (Previously presented) A method for reducing cellular damage due to ischemia, hypoxia, or reperfusion injury, comprising administering the peptide according to claim 27.

48. (Previously presented) The method of claim 47, wherein the method is for reducing damage to cells selected from the group consisting of heart, lung, liver, brain, and kidney.

49. (Previously presented) The method of claim 47, wherein said administering is by a route selected from the group consisting of intravenous, parenteral, subcutaneous, inhalation, intranasal, sublingual, mucosal, and transdermal.

50. (Previously presented) The method of claim 47, wherein said administering is by infusion through coronary arteries to the heart.

51. (Previously presented) The method of claim 47, wherein said reducing is reducing cellular damage to cardiomyocytes.

52. (Previously presented) The method of claim 47, wherein said administering comprises administering the peptide prior to ischemia, hypoxia, or reperfusion.

53. (Previously presented) The method of claim 47, wherein said administering comprises administering the peptide after ischemia, hypoxia, or reperfusion.

54. (Previously presented) The method of claim 47, wherein said administering comprises administering the peptide during ischemia, hypoxia, or reperfusion.